

SEP. 7. 2004 5:58PM 415 2687522

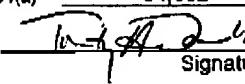
RECEIVED  
CENTRAL FAX CENTER  
SEP 07 2004

NO. 4906 P. 5/14

PTO/SB/22 (08-03)

Approved for use through 7/31/2008. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

|  |  |  |   |           |   |    |   |    |  |    |  |    |
|--|--|--|---|-----------|---|----|---|----|--|----|--|----|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>  |  | Docket Number (Optional)<br>146712008800 |   |           |   |    |   |    |  |    |  |    |
| <p>In re Application of William S. HERZ</p> <p>Application Number<br/>09/661,334</p> <p>For TRANSCODING MULTIMEDIA DATA SHUTTLE AND ARCHIVE</p> <p>Art Unit 2615</p> | Filed<br>September 13, 2000  |  |   |           |   |    |   |    |  |    |  |    |
|  | Examiner R. Chevalier  |  |   |           |   |    |   |    |  |    |  |    |
|  | <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: right;">\$ 110.00</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$</td> </tr> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u>.</p> <p>I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.</p> <p>I am the <input type="checkbox"/> applicant/inventor.<br/> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br/> Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).<br/> <input type="checkbox"/> attorney or agent of record. Registration Number _____<br/> <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a).<br/> Registration number if acting under 37 CFR 1.34(a) <u>54,552</u></p> <p><u>September 7, 2004</u> <br/> <u>Date</u> <u>Signature</u><br/> <u>(415) 268-7000</u> <u>Timothy A. Worrall</u><br/> <u>Telephone Number</u> <u>Typed or printed name</u></p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.</p> <p><input type="checkbox"/> Total of <u>1</u> forms are submitted.</p> |  | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ 110.00 | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ |
|  | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$ 110.00                                |   |           |   |    |   |    |  |    |  |    |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))  | \$   |  |   |           |   |    |   |    |  |    |  |    |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$   |  |   |           |   |    |   |    |  |    |  |    |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))   | \$   |  |   |           |   |    |   |    |  |    |  |    |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))   | \$   |  |   |           |   |    |   |    |  |    |  |    |

sf-1775762